Community Based Services Division of Protection and Permanency

AGENDA

August 18, 2011

PIP 1C.1.4 CASE PLANNING, FTM'S AND CONCURRENT PLANNING

9:00-9:30	Welcome and Opening-Michael Cheek
9:30-10:00	Introduction-Gayle Yocum & Kathy Perkins
10:00-10:30	Why Update Philosophy and Practice of Family Team Meetings, Case Planning and Concurrent Planning Denise Weider & Pam Pettry
10:30-10:45	Break
10:45-11:30	SOP Updates & Questions-Lisa Durbin and Jennie Willson
11:30-12:30	Lunch
12:30-1:15	Application of Information- Denise McMillian and Debbie Vonnahme
1:15-1:30	Next Steps-Mike Cheek
1:30-2:15	Action Planning-Regions
2:15-2:30	Break
2:30-4:00	General Discussion-Mike Cheek

Engaging Families through, FTMs, Concurrent Planning and Case planning

Informational meeting

August 18, 2011

Welcome - Michael Cheek

- Introduction and Agenda
- House Keeping
- Purpose of meeting- how the pieces fit together
 - Case planning
 - FTMs (DCBS leadership is committed to FTM process)
 - Concurrent Planning

Revisions to CPS timeframes Checonsulis investigations, in the homes and out of homes core Contract and reserved interval and notion, of months and remonstrating that the handout

CFSP PIP

Theme 1: Enhanced Family Involvement and Capacity to Provide for Their Children's Needs.

- 1A.3.2 Develop and implement regionally specific plans to improve the quality and frequency of family team meetings.
- 1C.1 Evaluate the quality of case planning process.
- 1C.1.1 Convene family-involved workgroups to review the structure of the case planning process. 2010 survey

CFSP PIP

- 1C.1.2 Revise case planning practice based on recommendations of workgroup and case review mapping.
- 1C.1.3 Develop tools to assist the family in understanding the case planning process.
- 1C.1.4 Provide training to field staff on revised process and tools to assist families in understanding the process.

CFSP PIP

Theme 2: Enhanced Child Stability and Permanency

- 2A.1 Enhance concurrent planning practice.
- 2A.1.1 Seek TA from family centered practice NRC to evaluate concurrent planning practice.

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Family Survey 2010

 A survey was conducted in 2010 with families to assess the effectiveness of the case planning process and family team meetings. Cases selected were filtered to only include families that had a current assessment and case plan with no pending investigations.

There are four types of cases the workgroup explored:

- 1. In-Home and with FTM
- 2. Out-of-Home with FTM
- 3. In-Home without FTM
- 4. Out-of-Home without FTM

Adoption and status cases were excluded

Family Survey 2010

cont.

- ☐ Regional Conference Calls
- A. January 25 2011 Regional plans for addressing FTMs
- B. February 1, 2011 FTM timeframes, case planning revisions needed, concurrent planning philosophy shift, training for field staff, decision re: 90 day rec.
- ☐ SRA Meeting February 9, 2011
 - To discuss family survey and ways to enhance case planning process

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Survey Findings

- Varied definition and inconsistent use of FTM
- Facilitators are not utilized/available statewide
- Families not understanding the purpose of the FTM or case plan and not really engaged in the decisionmaking process; some not aware of being able to invite supports
- Positive worker attitudes with some instances of negativity/unprofessional
- Workers not making referrals for parents in about half of the identified cases

Survey Findings

cont

- FTM/Case planning process can be improved by better communication and explanation to the family
- Families believe they have made progress since working with DCBS and their family is the main motivator
- When other needs arise, workers are willing to assist the families
- Services are helpful and appropriate for the families
- When FTM's/Case planning conferences were held, families felt they were helpful
- Overall, ongoing workers assist families and families are appreciative

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Survey Findings (Barriers)

- Limited comfort level of the family
- Transportation to/from meeting by family and their supports
- Lack of follow-through by staff, community partners, family
- Engaging community partners
- Limited resources in community
- Time commitment required to schedule and conduct FTM and case plan meetings

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Actions taken as result of survey

- Review current FTM and case planning Standards of Practice (SOP)
- Workgroup members observe/assess current DCBS case planning/FTM training for field staff
- Utilize the 2007 FTM Strategic Plan for definition and SOP clarity
- Revise SOP as needed based on workgroup's recommendations after above tasks are completed
- Develop tools/practice guide to assist the family in understanding the case planning process
- Provide training to field staff on revised process and tools to assist families in understanding the process

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Questions?	
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Concurrent	
Planning	***************************************
2011	
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Concurrent Planning versus Permanency Planning	
remanency ramining	Annual of the Control
What does Concurrent Planning	
mean to you?	

Historical Perspective:

Three Major Child Welfare Laws

- 1. Adoption Assistance and Child Welfare Act(1980)
- Enacted 31 years ago and laid the foundation for our current
- In order to receive federal money, "reasonable efforts" to prevent removal and to achieve reunification be made (redirects federal incentives away from out of home care placement and into preventive services- wanted to avoid multiple foster care placements- focus on birth family).
- Regular judicial oversight of children in foster care is required.
- Promotes and emphasizes family reunification or adoption, as appropriate(recognized that some children will not be able to return home).
- Provides for federal reimbursement of adoption subsidies for children with special needs.

Historical Perspective: Three Major Child Welfare Laws

2.The Adoptions and Safe Families Act (ASFA) (1997)

- Extends and expands Child Welfare Act of 1980.
 17 years later timetables imposed and shortened.
- Balances family preservation and reunification with the health and safety of children (Now looking at the rights of the child to have a permanent family). Limits family reunification services to the 15 month period beginning on the date the child enters foster care.

- date the child enters foster care.

 Requires states to initiate or join in termination proceedings for children who have been in car for 15 of the last 22 months.

 Requires the states provide health insurance coverage for all special needs children (removed barriers making it more affordable for foster parents to adopt).

 In Kentucky Adoptions assistance rates were expanded to remove barriers to adoption (1999) Family Treatment Home rate approved).

Historical Perspective: Three Major Child Welfare Laws

- 3. Fostering Connections to Success Act of 2008 contains the following provisions/requirements:
- Agencies <u>must</u> exercise due diligence to notify all adult relatives of a child within 30 days of the child removal, of the relatives' options to become a placement resource for the child (can access at administration for children and families).
- SOP revised- SSW requests the court order the family complete the DPP-1275 Relative Exploration Form prior to the 5-Day.
- DPP-1275 Relative Exploration Form provides a structured approach to notify relatives once identified.

922 KAR 1:140 - Adoption and foster care permanency services Definition:

Concurrent planning means the Cabinet simultaneously plans for the return of a child in the custody of the Cabinet to the child's parent and another permanency goal* for the child if return to parent is not achieved within fifteen (15) out of twenty-two (22) months.

*Remember there can only be one permanency goal. Permanency objectives are utilized in concurrent planning when exploring additional permanency options.

How to talk to families about ASFA

- The Adoption and Safe Families Act of 1997:
 Under the federal law (ASFA), timelines were established for states to terminate a parents' rights and for limiting a child's wait to be adopted after their parents' rights have been terminated. Prior to this law, many children lingered in foster care without having a permanent home.
 DCBS must file a petition to terminate parental rights at the same time, identify, recruit, process and approve a qualified adoptive family on behalf of any child that has been in foster care for 15 out the most recent 22 months

- Exceptions to the Law can be made to this requirement if;

 > a child is being cared for by a relative

 > DCBS has a convincing reason why filing for TPR is not in the best interest of the child; or

 > DCBS has not provided the necessary services to the family in order to return the child to a safe home.

How to talk to families about **Fostering Connections**

- Fostering Connections to Success and Increasing Adoption Act of 2008:
 - In an effort to place a child with relatives as soon as possible after being removed, DCBS will identify and provide notice to the state of the all adult grandparents and other adult relatives of the child
 - The notice will be sent to any other adult relatives suggested by the parents
 - The family's input is strongly encouraged so the best placement can be located in a timely manner. If the child cannot be placed with appropriate relative, the relationship between the relative and child will be encouraged to continue through visits, phone calls, letters etc.

Concurrent Planning Tenets



- Redefining timely permanency as the main priority for the child

- Early assessment of the family for Concurrent Planning
 Full disclosure regarding the negative impact of out-of-home
 care on children (SOP 4.16)
 Achieving timely permanency through 15 out of 22 months
 Written and negotiated case plan agreements between birth
 parents and caseworkers
- Permanency must be pursued for children of all ages (Aggressively seek out relatives and past positive connections. Recruit adoptive parents)
- Foster parents will be fully informed of DCBS's mission and goals (refer to website handout). http://chfs.ky.gov/dcbs/dpp/fostercare.htm
- Adoption will not be the only option.

Concurrent Planning OLD Perspective

Concurrent Planning

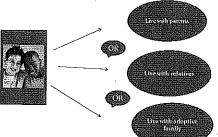






Concurrent Planning a <u>NEW</u> direction

Concurrent CASE PLAN (refer to objectives and tasks tip sheet)



Shift in practice for workers and foster parents

Reunification and locating family takes time—an effort worth a worker's time and energy.

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Shift in practice for Workers

- Examine your beliefs about fathers;
- Examine your beliefs about the value of family connections; and
- As we shift toward structured searches for appropriate relative caregivers, how will you support the birth parent? the child? the foster parent?

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Shift in practice for Foster Parents

Emotional risk

Foster parents can develop an expected outcome for children placed in their care. Because the actual outcome for the children is not in their direct control, they can run the risk of experiencing negative feelings if the outcome is not what is expected. The further away from the expectation the actual outcome is, the more conflict that is felt.

Shift in practice for Foster Parents

Entitlement is a feeling, developed over time, that you know what is best and have more rights in an out-of-home case than you really do. This feeling, that what you want in a case should happen, leads to higher emotional risk because you may discount the efforts and opinions of others to the point where you think everyone else is wrong and has "turned against you." This is very dangerous for you emotionally and can hinder your ability to be objective and therefore to be a foster parent.

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Concurrent Planning/Permanency Planning

What does Concurrent Planning mean to you?

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Questions?

Thank You!

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Case Planning and FTM SOP Highlights 2011

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Family Team Meetings SOP 1.

A family team meeting (FTM) is a tool for engagement used to assist a family in achieving safety, permanency and well-being outcomes and sustainable family changes.

Family team meetings are held:

- Ninety (90) days after the opening of a case (including inhome cases) or ninety (90) days after a child enters out of home care:
- · Within thirty (30) days of reunification; and
- At other critical junctures, as requested by the family or DCBS.

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Family Team Meetings SOP 1.7

- Emphasis on inviting formal and informal partners that can truly assist the family, and that we can be creative about how we involve them (by phone, by letter, etc.)
- Importance of documenting in service recordings attempts to engage relatives, fathers, and partners.
- If an FTM is held at times other than for case planning purposes, the SSW modifies the case plan in TWIST when new tasks are negotiated or changes in the case have occurred (child returns home, new baby is born, new adult household member is added such as a paramour etc).

90 day In-Home FTM

SOP 1.7

- Focus is on assessing progress and making sure we are wrapping services and supports around the family to prevent further maltreatment or maintain the family together safely at home.
- If this is a Kinship Care case, involve not only the parents but the relatives to make sure everyone is on the same page.

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90 day OOHC FTM

SOP 1.7

- Focus is on assessing the family's progress and making adjustments to case plan objectives and tasks as needed.
- Another point to look for or consider possible relatives for placement.
- Adds a concurrent planning permanency objective in the Child/Youth Action section of the case plan, if the case meets criteria for concurrent planning.
- Helping prepare parents and children if reunification is imminent.

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Reunification FTM

SOP 1.7

- If held prior to children returning home, focus on increasing visitation and how to monitor this to assess safety and parent's readiness for reunification.
- Looking at transitioning of services current in place or what services are needed to help the family to be successful such as Intensive In-Home Reunification services or Family Reunification Services.
- Developing a plan to mitigate risks such as relapse plans for substance abusing parents, supervision plans, support plans etc.

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Case Planning SOP Updates

- Inviting people who can help the family and who the family wants there.
 Involving children whenever possible particularly school age children and older perhaps at the beginning of a conference to minimize their time out of school and not subjecting them to adult issues.
 Tools developed specifically for cases involving domestic violence.
 Case Planning Monting Products as a contract.
- Case Planning Meeting Brochure so parents know what to expect prior to conference.

Case Planning SOP Updates

cont.

- · Increased FSOS involvement in the case planning
- Objectives and tasks should be specific, realistic, measurable, individualized, time-limited and linked to the maltreatment identified in the CQA
- The Elements of the Case Plan grid is found in practice guidance that talks about the difference between goals, objectives and tasks.
- Case Planning SOP and Concurrent Planning SOP was combined as the processes for children in OOHC need to occur simultaneously.

For In-Home Cases

SOP 3.4

• FSOS providing input to the worker on identified issues that need to be addressed.

For OOHC Cases

- Dockets a permanency progress review with the court no later than 6 months after the child is removed from the home, regardless of placement or custody, when the child is 16 or younger at the time of removal in accordance with Family Court Civil Rule 34. SOP 4.14
- Re-dockets the case, following a termination of parental rights, for court review in accordance with Family Court Civil Rule 36. The hearing is to occur within 90 days from the date of the entry of the order of termination, and reviews progress towards finalization of an adoptive placement for the child. SOP 4.14

5 Day Conference

SOP 4.17

- · This is a critical meeting with families. The family is in crisis due to the removal of the children and may be more receptive to change as a result.
- · Sets the tone between P&P and a family that carries on throughout the period the case is open.
- It is important to prepare for this conference, and then during the conference, cover numerous important issues.

Preparing for the 5 Day Conference

SOP 4.17

- Along with the FSOS worker completes the concurrent planning review tool and files it in the case record prior to the five (5) day case planning conference;
 Reviews the case history, circumstances and investigative information to determine if the case meets concurrent planning criteria for the initial case plan;
- plan;
 Ensures full disclosure by respectful candid discussion from the outset with all parties involved in the case planning and service provision of the:

 A. Negative impact of foster care on children;
 B. Clarity about the birth parent's rights and responsibilities;
 C. Supports DCBS will provide;
 D. Permanency options;
 E. Concurrent Planning; and Consequences for not following the Case Plan

During the 5 Day Conference SOP 4.17

- Assists the family in completing the DPP-1275 Relative Exploration form if not previously completed;
- Provides a copy of <u>When a Child is Removed From Your Care</u> handbook to the birth parents/caregiver, if they have not already received it;
- Utilizes the <u>Case Planning Objectives—OOHC Tip Sheet</u> and ensures that the case plan contains one family level objective that focuses on the reason the child was removed from the home and tasks the family must complete for reunification

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During the 5 Day Conference

SOP 4.17

- Documents the decision concerning concurrent planning and the permanency goal on the case plan
- Adds a concurrent planning permanency objective in the child/youth action section of the case plan if the case meets criteria for concurrent planning (example provided in your packet on how to do this in twist).
- Checks the concurrent planning box in TWIST if the case meets criteria to be a concurrent planning case according to the review tool
- The FSOS chairs the meeting and provides input into case plan development (periodic reviews also)

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Court: Temporary Removal Hearing SOP 11.15

.The worker:

- Provides a copy of the "When Your Child is Removed From Your Care" handbook to the birth parents/caregiver;
- Requests that the court orders the custodial parent to name the non-custodial parent if unknown or not legally established and completes the DPP-1275 Relative Exploration Form

Permanency Hearings SOP 11.30

The worker:

- Sends a copy of the DPP-165 Permanency Hearing Notification to the court requesting a permanency hearing no later than sixty (60) calendar days prior to the required due date, which is: 1
 - No later than twelve (12) months from the date the child entered out of home care (OOHC) by order of temporary custody during the temporary removal hearing or placement as a result of voluntary commitment; and
 - Every twelve (12) months thereafter if custody and out of home placement continues.

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Reasonable Efforts Updates

The CAPTA Reauthorization Act of 2010 provides two new additions related to reasonable efforts being waived:

- To have committed sexual abuse against the surviving child or another child of such parent; or
- To be required to register with a sex offender registry

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Permanency Goals & Concurrent planning

The three primary permanency goals for concurrent planning, in order of preference, are:

- · Return to parent;
- · Permanent relative placement; and
- Adoption.

The following are also permanency goals and are explored only after exhausting all three primary permanency goals:

- Planned Permanent Living Arrangement (PPLA);
- Emancipation; and
- Legal Guardianship.

Concurrent Planning Process

- · Exercise due diligence when searching for relatives
- Working a goal of return to parent while simultaneously evaluating and implementing other permanency options (such as permanent relative placement or adoption).
- Locating absent parents and identifying maternal and paternal relatives is critical to this process. Engaging family members, as well as their support systems to achieve permanency for each child in care is essential.

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Concurrent Planning Process cont.

- Concurrent planning does not mean changing the permanency goal,
- It does mean adding concurrent alternate permanency objectives in the child/youth action section and associated task in the case plan to secure permanency for the child in the event that the child cannot be returned to the parents or family.

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New & Updated Resources

- When Your Child is Removed from Your Care-A Parent's/Guardian's Guide
- Menu of Expectations for Batterers in Child
 Protection Cases Where Domestic Violence is Present
- Some Practice Considerations for Child Protection Cases Involving Domestic Violence
- 4. Case Planning Meeting Brochure
- DPP-400 90-Day Concurrent Planning Family Assessment
- 6. Concurrent Planning Practice Guide

Questions?

Training Exercise



Thank You!

Establishing A Training Plan

Things to keep in mind as you develop regional plans:

- ☐ The Training Branch and Central Office staff will be available to assist with your training needs at all levels.
- ☐ The purpose of your training is to foster a discussion around:
 - The engagement of families and partners in problem solving.
- □ Teaching staff about the new SOP changes in case planning and how to use new tools when working with families.
 □ Ensure that staff understands the philosophical shift related to FTM & concurrent planning.

DPP Director - Michael Cheek

Time frames for regional plans:

- >8/18/11- Draft plan developed
- > Specialist and FSOS will be trained 30 days from effective date of SOP
- > FSOSs will train line staff

Establishing a Training Plan FTM, Case Planning and Concurrent Planning Training September 2011

Who must be trained?	Mandatory By 11/15/11 How many?
Regional staff	
SRA	
Specialists	
FSOS	
Investigative	
Ongoing	
Generic	
adoption	
adolescent	
TOTAL NUMBERS	

Who must be trained	Mandatory by 5/15/12 How many?
R and C workers	
Ongoing workers	
Investigative workers	
Generic workers	
Adoption workers	
Adolescent workers	
Total numbers	

- 1. Who will receive the training first, second and so forth? Need Begin and End Dates.
- 2. Who will deliver the training to the frontline staff? Remember that CO and the training branch are available to assist.
- 3. In your region, how many trainings will be offered?

4. Who will be the trainers? Who will their backups when sick or pulled from this task? Will these be different in different areas of the state or other circumstances?

5. What assistance is needed? (DPP Central Office staff, Training Branch trainers, equipment, supplies, etc)

6. What activities will participants be asked to perform in class? How will you know they have assimilated this information and can put it into practice in the "real world"?

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